

NAME: _____
STREET: _____
CITY: _____ STATE: _____ ZIP CODE: _____

INVOICE NUMBER: _____

SPONSOR: _____ DATE: _____

FEDERAL PROJECT NO.: _____ BRIDGE NUMBER: _____

COST

Preliminary Engineering: _____

Construction Costs: _____

Construction Engineering: _____

Right of way costs: _____

Legal Costs: _____

Utility Adjustments: _____

Change Orders: _____

TOTAL COSTS TO DATE: _____

Deductions:
(Non-participating costs, etc.) _____

TOTAL AMOUNT DUE CONTRACTOR: _____

Work Performed by Sponsor: _____

TOTAL COST TO DATE: _____

Less: Sponsor's Participation _____

TOTAL DUE TO DATE: _____

Less: Previous Payments Requested _____

AMOUNT DUE SPONSOR: _____